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Passive Constructions in American Sign Language

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1. INTRODUCTION¹ In this discussion, we identify the passive construction in American Sign Language (ASL), and discuss its function within ASL discourse. The existence of a passive construction in ASL has been alluded to in the literature, but discussion is infrequent, and the usual conclusion is that a passive does not, in fact, exist. We contend, however, that passives are more frequent in ASL discourse than may have been realized, and that a particular configuration of already understood grammatical features must be recognized as a fully passive construction.

ASL has traditionally been described as having only active voice. Stokoe, Casterline and Croneberg (1965) were among the first to propose that passive constructions were not found in ASL, although several authors (Wilbur 1987, Kegl 1990) do allude to the possibility that a passive form may exist. What Stokoe et al. suggest might be construed as passive they eventually determine is simply a "reversal of personal reference (p. 282)", in other words, a verb is inflected to agree with its subject and object, but does not have a truly passive form. Wilbur 1987 points out that Stokoe et al's conclusion is significant, not necessarily because they conclude that ASL does not have a passive, but because their conclusion is not based on a search for morphology similar to the English passive. Isenhath (1990), however, does not consider ASL on its own merit, exemplifying the point of view that suggests that because no English-type passive structure is found in ASL, it is just plain not there. "ASL verbs do not have voice," Isenhath (1990:39) concludes.

Kegl's (1990) account is entirely structural, and has to do primarily with detransitivizing the verb. It appears Kegl means that the passive form of the verb agrees with only one argument rather than two, whereas a regular transitive ASL verb agrees both with a subject and object by beginning and ending its movement at loci associated with agent and patient respectively.

With the exception of the above, ASL has traditionally been described as having only active sentence structure. Perhaps what is remarkable, though, is that active and passive voice is discussed so little, whether or not passive construction is believed to exist. It might be that it has been difficult in a signed language to know what to look for, and some features of ASL grammar may have complicated the exploration. Word order in ASL is considered to be flexible, although SVO is often argued to be the most basic. It is common to have topic-marked constituents, which are clause-initial, marked by raised eyebrows and a slight backward head tilt, and are often followed by a slight pause. We propose that active and passive constructions are distinguished in ASL, and that the passive is characterized by a particular arrangement of features in the predicate. In particular, three parameters of ASL grammar interact, and when these are

combined in a certain way, a prototypical passive results. Less prototypical passives may result, however, from alternate combinations.

1.1. SYNTACTIC AND FUNCTIONAL DIMENSIONS OF PASSIVES. Before further discussing the features of ASL that combine to form the passive, it is necessary to look at what a passive is. Voice is defined by Bybee (1985) as a grammatical category relevant to both the verb and its arguments. Voice signals changes in the roles of the NPs in a sentence and the perspective from which the situation described by the verb is viewed. Givón (1990:566) states that the “same semantically-transitive event, coded by the very same verb, agent and patient, may be rendered from several discourse-pragmatic **perspectives**” (emphasis his). Givón further suggests that the relative topicality of the agent and patient plays an important role in how the sentence will be constructed. Whereas the agent enjoys a prototypical topic position in the active voice, according to Givón, the passive results from the demotion of the agent from this position.

The demotion of the agent, however, leaves open a possible position (or function) for another NP to take over. An agent might be de-emphasized or even avoided because it is unknown, irrelevant or suppressed (Barber 1975), but if so “some strategy must be available to remove the agent subject and replace it with either a dummy or an NP having some other function in the sentence proposition” (Barber 1975:16). Shibatani (1985:30) outlines three functions of the passive, summarized here. First, passives prototypically involve no mention of an agent for contextual reasons, agent defocusing being the primary pragmatic function of the passive. Second, passives bring a topical NP other than an agent into subject position, although Shibatani suggests that the topicalization of a patient is not the main purpose of the passive. Third, the passive acts as a syntactic pivot, important for coreferential deletion processes. Critical for Shibatani is that active and passive constructions are not discrete, but rather, form a continuum. Hopper and Thompson (1980) also treat passives as being on a continuum, as can be seen in their discussion of passives and transitivity. “More uncontroversial passives, of the type found in English...in our terms, are low in Transitivity: they typically have, or must have, only one argument, and this argument generally exercises no control over the event denoted by the verb.” (Hopper and Thompson 1980:293)

2. THE PASSIVE IN ASL

ASL clauses fall along an active/passive continuum, with prototypical active constructions at one end and prototypical passives at the other. The prototypical passive in ASL is characterized by the following.

1. Defocusing, or the demotion of, the agent, so that the agent is not mentioned. As Shibatani (1985:831) suggests, “passives are used when the singling out of an agent is either impossible or unimportant—because of its being unknown, obvious, or irrelevant.” In our prototypical examples from ASL the agent is assumed or obvious. Less prototypical examples may have the agent

mentioned, but either not as the subject of the verb, or an NP that is much lower in transitivity, for example SOMEONE or WHO.

2. The event is viewed from the perspective of the patient rather than the agent. In the active construction, the point of view is clearly from the agent. That is, for many verbs in ASL, the beginning point of the articulation of the sign is located at a particular point in the space in front of the signer, while the endpoint is located at a second point in space. The spatial locus at the beginning point is associated with the agent of the action, and the endpoint, with the patient or recipient of the action. Point of view, however, is not typically discussed in ASL literature, perhaps because it is 'nonmanual,' that is it has to do with subtle shifts in the position of the shoulders and torso, and with eye gaze. In the active construction, the signer's shoulder leans slightly in the direction of the agent positioned in the signing space, and eye gaze is in the direction of the patient. The agent is more topical than the patient.

In the passive, the patient is more accessible, or given information, than is the agent. The patient is marked in the verbal agreement system as the final locus of the verb movement, but the event coded by the verb is viewed clearly from the perspective of the patient rather than of the agent. The identity of the patient is evident, whereas that of the agent is not. The signer may move his or her shoulders and torso slightly away from the spatially positioned agent, with eye gaze directed toward the agent of the action. The patient may, of course, be formally marked as the topic constituent in ASL. It is presumed, however, that the major function of topic marking is not to indicate the passive, as might be suggested by Givón's remarks. Whether or not an NP designating a patient is found in topic position may have no real bearing on the passive construction involving the verb and its arguments as we describe it. A patient may be a marked topic, and yet the arrangement of the verb and its argument(s) may satisfy the definition of an active clause.

3. For an agreement (or directional) verb, the prototypical defocusing of the agent means that rather than an agent being specified in the syntax by associating an agent NP with a particular locus, the locus is empty. The movement of the verb must still begin at some locus, however, and it is commonly understood that the semantic designation of the locus must be specified before the locus becomes operable. But in the passive, no agent is specified, with the result being that the movement of the agreement verb begins at a syntactic, but semantically empty locus. This differs from "null" arguments in which lexical items are not signed in the local construction, but the semantic material associated with the locus has been previously specified in the grammar in some accessible way. In the passive, the agent is typically not identified.

3. ACTIVE VERSUS PASSIVE CONSTRUCTIONS

The following examples (1) to (4) show the difference between a verb and its arguments arranged to give an active reading, and the arrangement that we understand to be passive. All of our data are taken from commercially available videotapes of ASL signers, most of which are in wide circulation.²

- (1) (*An Introduction to American Deaf Culture*, © MJ Bienvenu and Betty Colonomos)

SIGN STUDENT, SECOND, INTERPRET INTEREST LEARN

CONNECT INTERPRET, TEACH-agent, PRO.3_{pa}, DEAF WORLD_b,

(PRO.3_a) _aSEE_b+++.

'Signed language students, interpreters interested in learning (about Deaf culture) for their work, and teachers observe aspects of Deaf culture.'

In (1), the active construction, the plural agent (i.e. the signed language students, interpreters and teachers) is at locus 'a', designated by subscript 'a'. The verb SEE agrees with its subject and object in that the direction of the movement of the verb is from locus 'a' toward 'b', the locus of the patient DEAF WORLD 'Deaf culture'. The signer moves her shoulder toward locus 'a' and looks in the direction of locus 'b', thus indicating that the situation is viewed from the perspective of the agent.

The perspective, however, is much different in (2) to (4).

- (2) (*An Introduction to American Deaf Culture*, © MJ Bienvenu and Betty Colonomos)

_____t

POSS.1 NAME M-J B-I-E-N-V-E-N-U. _aNAMED₁ MJ(*sign name*).

'My name is MJ Bienvenu. The name I have been given is "MJ".'

- (3) (*An Introduction to American Deaf Culture*, © MJ Bienvenu and Betty Colonomos)

_____t

IF HAPPEN _bLOOK.OVER.SHOULDER₁, PRO.1 FEEL MORE STRESS.

_____t

POSS.1 TYPING FEEL MORE TYPE.STIFF.

'If my shoulder is being looked over, my typing feels more stilted/If someone is looking over my shoulder, my typing feels more stilted.'

- (4) (*American Sign Language: A Student Text, Unit 1 - 9*, © Charlotte Baker and Dennis Cokely)

^t
REMEMBER ONE.YEAR.PAST BASKETBALL TOURNAMENT,

EXCITE, WIN. ^g₃
_aGIVE(2h)₁ TROPHY. REMEMBER.

Do you remember the basketball tournament last year, that we were excited to win? We were given the trophy, remember?’

In (2) the signer introduces herself and then tells us her ASL sign name. The situation described by the verb _aNAMED₁ is a prototypical passive. First, it is viewed from the perspective of the patient, the signer herself. Being named MJ is something that happened to her. She is in focus in this construction; the event is not about the agent. Second, the agent is not specified and is quite clearly not in focus. Of course, someone with the appropriate background could surmise that the two most obvious sources of the sign name would be either the signer’s parents or the Deaf community itself, but in this case, the source has not been mentioned, and is perhaps irrelevant in this particular context (cf. Barber 1975, Shibatani 1985), and is left unindividuated. Third, the locus ‘a’ where the verb _aNAMED₁ begins is a locus in the signing space for which no NP has been associated in the signer’s discourse. In other words, the verb agrees with an unfilled locus. The signer moves the verb toward herself, the endpoint locus ‘1’, the recipient of the sign name already introduced in the discourse and highly topical, and the only identified argument of the verb.

As Givón (1990) suggests, it is possible to view this situation from another discourse-pragmatic perspective, that of the agent. In this case, the signer might have wished to communicate something about the act of bestowing a name sign, identified the agent, and through a shift in the shoulders and eye gaze as described above, taken the perspective of the agent. This is discussed in more detail in section 5, regarding the passive and reference shifting, below.

Examples (3) and (4) are further instances of the arrangement of characteristics in the verb phrase resulting in a passive reading. In (3) the locus ‘b’ in _bLOOK.OVER.SHOULDER₁, and the locus ‘a’ in _aGIVE(2h)₁ in (4) are similar to that described in (2). No agent is specified, the patient rather than the agent is in focus, and while the loci ‘b’ and ‘a’ are morphosyntactically required in the spatial agreement system of the verb, they are not filled with any semantic material. The identity of the agent is not relevant in these cases.

It was suggested above that when the event is viewed from the patient’s perspective the signer’s eye gaze is toward the locus of the agent, but this may not be a requirement if some aspect of the scene allows for the signer to direct his or her gaze elsewhere. In (3) the signer’s message is that he is being intruded upon by someone looking over his shoulder as he is typing. While the eye gaze is not in the direction of the agent in this case, it very well could be, and in fact because the event is construed as being from the patient’s point of view, the eye gaze

could not shift to take on the perspective of the agent. A more extreme example is given in (5).

(5) (*When the Mind Hears* (A synopsis in ASL), © Harlan Lane)

DOCTOR WILLING SEE, CAN COME_a++ TWICE EVERYDAY++++

FOR TWO.WEEK. MEDICINE _bINJECT.IN.EAR₁++ (gesture to ear)
TWO.WEEK.

'The doctor was willing to see him, saying he could come twice each day for two weeks. He was given medicine for the two weeks.'

While _bINJECT.IN.EAR₁++ still qualifies as passive in (5), it may not be quite as prototypical as the examples above in that the agent has been identified in the previous sentence. This passage is a good example, however, of a shift in perspective, from that of the doctor expressed in the verb COME_a++ 'come to' with the doctor at locus 'a', to that of the boy receiving the ear medicine. The doctor is clearly the agent (at the new locus 'b'), but the situation _bINJECT.IN.EAR₁++ is not viewed from the doctor's perspective, but rather, the recipient's. The event is unpleasant, in any case, and the patient is looking away from the agent. In a sense, the perspective of the patient is made even stronger by the signer, whose narration is about someone other than himself, but who employs an ASL grammatical device in which the signer uses his own body as a locus (locus '1') for the third person referent.

4. TOPICALIZATION IS NOT PASSIVIZATION

Givón (1990) suggests that topicality plays an important role in passivization, but in a language like ASL, in which sentences are likely to include a grammatical topic, this marked topic and the passive structure have different functions. Topicalization in ASL is not passivization. The topic sets the framework for the information to follow. Li and Thompson (1976) claim that in topic-comment languages, passivization is not really needed—any NP (among other things) can go in topic position, and there is no need for any other construction to defocus a subject. Yet there are topic-comment languages where both topicalization and passive constructions occur, such as Mandarin (Li and Thompson 1981) and argued here, ASL, but these two constructions have different functions.

In example (2) above, the topic marking on the verb complex _aNAMED₁ might be thought to have something to do with passivization, considering their proximity, but their connection is slight, if at all. The topic marking in this case occurs because the verb expresses a clearly accessible pragmatic piece of information from a cultural 'insider' point of view. The phrase could receive topic marking whether or not the perspective is from the agent or the recipient.

A marked topic occurring with an active construction in ASL is shown in (6).

- (6) (*When the Mind Hears* (A synopsis in ASL), © Harlan Lane)

t

 MOTHER DO-DO, TAKE+ FEEL GO CHURCH, TRAVEL(*uphill*). IN

 t

CHURCH PRAY++. CLERC PRO.3_a (gesture) 1LET_a DO-DO WHAT.

‘His mother decided to take Clerc to church, which was up the hill. In the church she prayed, but she let Clerc do what he wanted.’

In the second sentence of this example, CLERC is the topic constituent, and this is followed by a pronoun positioning Clerc in locus ‘a’. The verb 1LET_a is signed from the mother’s point of view, with the movement beginning near the signer’s torso (again, the signer’s body stands in for the third person referent) and moving toward locus ‘a’, thus it is an active construction. In (7) topicalization occurs with a passive construction, but they are not one and the same.

- (7) (*American Sign Language: A Student Text, Unit 1 - 9*, © Charlotte Baker and Dennis Cokely)

+nod _____ t

 YESTERDAY FINISH, B-I-L-L aGIVE_i 800.

‘Yesterday I was given a bill for eight hundred dollars.’

Here the signer has been discussing taking his car in to the shop for repairs. The situation, which includes the unspecified, but obvious, agent at locus ‘a’, is coded as a topic in its entirety. Receiving a bill after the car has been fixed is an expected result, and therefore is completely accessible to the addressee. The defocused agent, presumably a shop employee or owner, is at best lumped in with the pragmatic understanding of the whole scene, but cannot be said to be the topic itself.

5. REFERENCE SHIFTING AND PASSIVIZATION

Reference shifting (also referred to as role shifting by some) is a discourse feature by which the signer relays the actions or conversation of different characters in a narrative (Lillo-Martin 1995). Similar to what has been described above, the signer shifts his or her shoulders and torso slightly in the direction of each character, and typically looks briefly in the direction of another character.

Why then is the passive not just an instance of such reference shifting? While these two processes do share features, reference shifting in narrative is from agent to agent, that is, each shift changes the perspective from one agent to another. The passive, conversely, may involve a shift from one character to another, but in the passive construction, the perspective additionally shifts to that of the patient. Alternatively, the focus may remain on one character, but a shift may take place from the perspective of the character as an agent to the perspective of the same character as a patient. Example (8) is particularly illustrative of this.

- (8) (*When the Mind Hears* (A synopsis in ASL), © Harlan Lane)

^t
FATHER SEEM EMBARRASS HAVE DEAF SON, (emphatic gesture).

MEAN _a(multiple)STARE.AT₁.

'His father seemed embarrassed about having a deaf son. It meant that he would be looked down upon.'

(*perspective shift*) PRO.3_b FAMILY HAVE DEAF, SOMETHING WRONG.

'(People would say) his family has a deaf son; there must be something wrong with them.'

In this section of discourse, we find both the type of reference shifting discussed by Lillo-Martin and a passivizing perspective shift. In the first sentence, FATHER is in focus and is marked as the topic, but in the following sentence the verb _a(multiple)STARE.AT₁ indicates a perspective shift, still maintaining the father as the NP in focus, but with the action carried out by a plural, unspecified agent. Plurality is indicated in this verb by all the signer's fingers being extended rather than just the index and middle fingers, and the beginning of the movement is once again associated with an unfilled locus 'a'. The locus '1', where the movement of the passive verb ends, further indicates that once again the signer is using his own body to represent the third person 'father'. Here the perspective is clearly from the patient's point of view, and the signer's eye gaze is directed toward the unfilled locus 'a'.

In the final sentence, however, the reference shift is from the father as patient to the townspeople who are staring at him. While these people's identity is never overtly stated, we can make this assumption because earlier in the narrative the father has been identified as the mayor of a small town. As well, the perspective shifts from the father as a patient to the townspeople as agent. The signer's shoulder and torso shifts slightly toward locus 'a' and he points to a new locus 'b', understood to be the father's (new) locus. The signer, now having the perspective of the townspeople, addresses the father, the action being from the townspeople's point of view. This brief passage, therefore, is explicit in identifying both the role of each NP within the whole construction and the perspective marked in the verb complex.

6. A WEAKLY DEMOTED AGENT

It is sometimes the case that an agent is named in the passive construction, although the examples below show that the NP in this subject position is only weakly agentive. But even though it is generally thought that there is evidence of ASL having a basic SVO word order (e.g. Fischer 1975, Liddell 1980), for topic-comment languages the subject may not be a particularly important category (Li and Thompson 1976, also cf. Mithun 1991 for a discussion of languages thought not to have a subject category).

Example (9) is a continuation of the discourse introduced in (4).

- (9) (*American Sign Language: A Student Text, Unit 1 - 9*, © Charlotte Baker and Dennis Cokely)

- q
- a. THAT.ONE PRO._{3a} A-A-A-D HOUSTON PRO._{3a} THAT.ONE.
 ‘The one from the A.A.A.D. Houston game?’⁴
- b. SOMEONE _bSTEAL_(up).
 ‘It was stolen/someone stole it.’

In (9b), rather than being designated a spatial locus in the sense described for NPs above, SOMEONE is signed on a slightly higher plane. The verb _bSTEAL_(up) first agrees with locus ‘b’ associated with the location of the item being stolen, and the movement of the verb is upward and slightly away from the signer. The situation is viewed from the perspective of the owner of the trophy (and the narrator). In this case the agent, which is possibly the grammatical subject, has increased slightly in terms of focus, but the situation is not viewed from the agent’s perspective.

The event could be construed from the agent’s perspective, however, if the movement of the verb were articulated from a locus in the signing space toward the signer’s body. This would not in and of itself identify the signer as the thief, because as we have already seen, the signer is at liberty to have his or her own body act as a third person referent. This construal would have the characteristic of reference shifting to the point of view of another agent, as discussed in section 5 above.

A similar situation is apparent in (10).

- (10) (*When the Mind Hears* (A synopsis in ASL), © Harlan Lane)

- t
- CLERC HIDE_a. STAY_a+_a THERE. WHO _bMEET₁, CLERC ₁LOOK.AT_b,
 FIRST DEAF TEACH-agent.
 ‘Clerc hid and stayed there. Then to his surprise, he was approached by the first Deaf teacher.’

Even though WHO occupies the subject position to the extent that SOMEONE does in (9b), the verb _bMEET₁ is construed from the perspective of the patient, the person being met. The identification of WHO is then given. While this instance may not be a prototypical passive, it is strongly marked by the appropriate passive perspective.

7. THE RELATION OF PASSIVES TO STATIVES

This notion is introduced here, but it is clear that further work is needed to explicate this relationship for ASL. Nonetheless, the kind of stative exemplified by (11) has features in common with the passive constructions discussed above.

- (11) (*American Sign Language: A Student Text, Unit 1 - 9*, © Charlotte Baker and Dennis Cokely)

MORNING, _aGONE_(up).

'In the morning it (the trophy) was gone.'

First, there is no agent mentioned in this sentence, and thus it would be impossible to describe the situation from an agent's perspective. The trophy, being inanimate, cannot have a perspective, but it is in focus, as designated by locus 'a', and by the eye gaze of the signer in the direction of locus 'a'. The stative is a result of some action, and similar to the movement of the verb _bSTEAL_(up) in (9b), the stative situation described by _aGONE_(up) in (11) is characterized by an upward movement from a specific locus.

8. DISCUSSION

In this paper we have given evidence for a passive construction in ASL. Further, we have shown that if all the features we describe are clearly in place, the passive can be considered prototypical. A construction may not always display all of these features, however, in which case it may be considered less than prototypical, but still not active. As such, it is appropriate to suggest that active and passive constructions lie along a continuum in ASL in the following manner:

(12)	Prototypical <-----> Prototypical	
	<u>Active</u>	<u>Passive</u>
	-agent is subject	-defocused agent
	-perspective of agent	-perspective of patient
	-agent is given information	-patient is given information
	-semantically filled,	-no semantically filled,
	syntactically specified	syntactically specified
	agent locus	agent locus

We show here that, in at least some ways, both spoken and signed languages behave similarly in some grammatical constructions and processes, but if signed languages are as much languages as are spoken languages, there is no reason to use spoken languages as the only model. In this light, how do signed languages construct the passive? Morphology is often held up as the identifying marker, but in ASL morphological units may look entirely different from those in spoken languages, and further, the combination of morphological units results in constructions for which many conventional, and by and large linear, descriptions

of morphology are inadequate. Perspective, as we have described, appears to be a significant part of ASL verb morphology.

It is expected that the function of language, no matter if the language is spoken or signed, is similar, and evidence of the speaker's or signer's cognitive framework as it contributes to the arrangement of morphology and syntax is of significant interest. This is clearly shown in the arrangement of features in constructions in ASL like the active and passive—what is immediately in focus in the mind of the signer is going to affect the construction of the linguistic expression.

The function of the passive in ASL is to either give or maintain a particular point of view, and this is accomplished in the verb complex by putting or keeping a patient in focus, and is accompanied by the defocusing of the agent. While this discussion has not attempted to describe every aspect of active/passive expression in ASL, it is a beginning. Further study should give greater understanding of the characteristics and distribution of the passive construction in ASL.

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² ASL signs are notated as upper case English words. Signs that require more than one English word are given as words separated by periods, as in ONE.YEAR.PAST 'last year', and signs understood to be compound in nature are given as words separated by hyphens. Signs that have repeated movements are written with '+', as in SEE+++ . Subscripts (e.g. 'a', 'b', '1', etc.) represent loci in the signing space that correspond to NP arguments. Pronouns are notated as PRO.1, PRO.2 and PRO.3 for 1s, 2s and 3s respectively. Possessives are notated as POSS.1, POSS.2 and POSS.3. Marked topic constituents are designated by '____t', and yes/no questions are designated by '____q'. Fingerspelled words are given in upper case letters separated by hyphens.

³ '2h' indicates that the sign is articulated with two hands rather than the usual one.

⁴ A.A.A.D. is the American Athletic Association of the Deaf.